

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213559770</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>DELMARVA POWER &amp; LIGHT COMPANY</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX ROAD, SUITE 285</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>12/31/2013</b></p> <p>SCC ID NO: <b>02019560</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000	
CLASS	AUTHORIZED						
COMMON	1,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: MAILSTOP 92DC42 500 N WAKEFIELD DRIVE</p> <p style="text-align: center;">CITY/ST/ZIP: NEWARK, DE 19702-5440</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: David M Velazquez  TITLE: PRES &amp; CEO  ADDRESS: 701 9th St NW  CITY/ST/ZIP/CO: Washington, DC 20068 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: David M Velazquez TITLE: PRES & CEO ADDRESS: 701 9th St NW CITY/ST/ZIP/CO: Washington, DC 20068	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Joseph M Rigby  TITLE: CHAIRMAN  ADDRESS: 701 9th St NW  CITY/ST/ZIP/CO: Washington, DC 20068 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: Joseph M Rigby TITLE: CHAIRMAN ADDRESS: 701 9th St NW CITY/ST/ZIP/CO: Washington, DC 20068	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME:	Ronald K Clark	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & CONTROLLER		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Michael J Kelley	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Donna J Kinzel	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & TREASURER		
ADDRESS:	500 N. Wakefield Drive		
CITY/ST/ZIP/CO:	Newark, DE 19702		
NAME:	Kevin M McGowan	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASST TREAS		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Michael W Maxwell	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Hallie M Reese	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Gary R. Stockbridge	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	401 Eagle Run Road		
CITY/ST/ZIP/CO:	Newark, DE 19702		
NAME:	J Mack Wathen	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASST TR&SEC		
ADDRESS:	401 Eagle Run Road		
CITY/ST/ZIP/CO:	Newark, VA 19702		
NAME:	Jane K Storero	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Patrick J Nisco	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TR&SEC		
ADDRESS:	701 9th St NW		
CITY/ST/ZIP/CO:	Washington, DC 20068		
NAME:	Jeffery E Snyder	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TR&SEC		
ADDRESS:	500 N. Wakefield Drive		
CITY/ST/ZIP/CO:	Newark, DE 19702		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeffrey M Taylor ASST SECRETARY 701 9th St NW Washington, DC 20068	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ Jane KStorero		Jane KStorero,		12/17/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					